

## **Maricopa County Justice Courts, Arizona**

		CASE NUMBER:
Plaintiff(s) Name /	Address / Email / Phone	Defendant(s) Name / Address / Email / Phone
(4)	tory Agent / Corporate Officer to be served is:	Determination (Address / Email / Friorie
		MPLAINT and SUMMONS
the Hearing Of to appeal, you	fficer or the Justice of the Peace in Small Cla may have your case transferred to the Civil a transfer, it must be made at least ten (10) ju	CASES. You do not have the right to appeal the decision of aims Division of this Court. If you wish to preserve your right Division of the Justice Court pursuant to ARS 22-504. If you udicial days before the day of the scheduled hearing.
written ANSWE you for the amo	E-NAMED DEFENDANT(S): You are directed to the court named above. If you do not answer	ND SUMMONS to answer this complaint within TWENTY (20) DAYS by filing a ver or defend, you run the risk of having a judgment entered against fee must be paid at the time your answer is filed. If you cannot either waive or defer the fee.
Date:	Clerk:	(SEAL)
	ΡΙ ΔΙΝΤ	IFF'S CLAIM
☐ The debt, o	or cause of action, or the incident that resulted in the control of the control o	n this claim, occurred in this precinct at the following location:
Date:	Plaintiff Plaint	Plaintiff r of authorization.
	Please inform court staff if interpreter services are required.   Yes, I need interpreter services.	

SC 8150-300 R: 11/27/17